

PATIENT SAFETY RECOMMENDATIONS

The following recommendations have been compiled from the reports of the expert review committees of the Office of the Chief Coroner of Ontario and patient safety organizations.

Interview spouses separately

An 83-year-old woman was strangled by her 85-year-old husband. He stabbed himself following the death of his wife. There was no history of domestic violence or other criminality. The husband had been diagnosed as suffering from depression by his health-care professional.

The Committee reminds health-care professionals to inquire about thoughts of homicide and suicide when interacting with elderly patients suffering from depression.

The Domestic Violence Review Committee also recommended that health-care professionals interview spouses separately. Like many elderly couples, this couple often attended medical appointments together. In cases, where there may be mental health or other issues, and where one spouse may be inhibited from speaking openly in front of the other, it may be beneficial to interview the individuals separately.

Domestic Violence Review Committee
– Office of the Chief Coroner of Ontario

Confusion can be a symptom of obstipation in elderly

Health-care professionals are reminded that constipation and obstipation are common, preventable and treatable medical conditions that affect the elderly. Untreated, these conditions can be devastating and may even result in death.

Obstipation may present either typically (abdominal pain, fecal incontinence) or atypically (e.g., increased falls as a result of confusion, delirium). Health-care professionals should be especially wary of systemic symptoms (e.g., tachycardia). In these cases, the ordering of laboratory examinations should be considered on a case-by-case basis.

Geriatric and Long-Term Care Review Committee
– Office of the Chief Coroner of Ontario

Reduce possibility of enteral feeds being given parenterally

Recently, ISMP Canada produced a safety bulletin after receiving reports in which breast milk was inadvertently administered to an infant by the intravenous (IV) route.

A preterm infant with a nasogastric (NG) tube and an IV line was to receive breast milk via the NG tube and a syringe infusion pump. However, the milk was inadvertently administered through the IV line. Shortly after the infusion of breast milk was initiated, the infant's condition deteriorated. Emergency medical intervention was required.

The potential clinical consequences of IV administration of breast milk or other products intended for enteral administration include septicemia, embolism, disseminated intravascular coagulation, and multiorgan failure, as well as respiratory and cardiac arrest. It is imperative that all facilities providing enteral feeding to neonates review their enteral feeding systems and practices to reduce the possibility of enteral feeds being given parenterally.

<http://www.ismp-canada.org>

ISMP Canada

Risk of hypoglycemia significantly increased in elderly

After reviewing the death of an elderly woman who had diabetes and suffered a significant decline in cognition before she died, the Geriatric and Long-Term Care Review Committee is reminding health-care professionals to recognize that hypoglycemia can lead to impaired cognition and function in the elderly and this risk of hypoglycemia is significantly increased in the elderly.

The common adrenergic manifestations of hypoglycemia such as tremors and sweating may be absent in the elderly. Complaints may be more vague, consistent with neuroglycopenic symptoms, such as dizziness, weakness and confusion.

Geriatric and Long-Term Care Review Committee
– Office of the Chief Coroner of Ontario

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